



Statement of Organization CANDIDATE COMMITTEE

CITY OF ALEXANDRIA

JUN 19 2012

*Please read instructions before completing this form.

VOTER REGISTRATION
ELECTORAL BOARD

Type of Statement					
<input checked="" type="checkbox"/> NEW This committee is registering with the Virginia State Board of Elections for the first time.	<input type="checkbox"/> AMENDED This committee is filing an amended Statement of Organization.				
<table border="1"> <tr> <td>Date Changes Took Effect</td> <td>SBE-issued Committee ID</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		Date Changes Took Effect	SBE-issued Committee ID		
Date Changes Took Effect	SBE-issued Committee ID				
Committee Information					
Committee Information	Helen Morris for School Board				
	Name of Candidate Campaign Committee				
	1500 Cameron St				
	Street Address/PO Box Suite #				
	Alexandria VA 22314				
	City State Zip Code				
Email Address	703-739-1379				
Daytime Phone #					
Campaign Website					
Candidate Information					
Candidate Information	Morris Helen Florence				
	Salutation Last Name First Name Middle Name Suffix				
	1500 Cameron St				
	Residence Address Apt #				
	Alexandria VA 22314				
	City State Zip Code				
	Alexandria 706026843				
	County or City of Residence Voter Identification #				
zozilla7@gmail.com 703-739-1379					
Email Address Daytime Phone #					
<input checked="" type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.					
Election Information					
Election Information	School Board A				
	Office Sought District (if one)				
	— 2012				
Political Party Year of Election	<input checked="" type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special				
Type of Election					



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Treasurer Information					
Treasurer Information	Salutation	Last Name	First Name	Middle Name	Suffix
	Residence Address		Apt #		
	City		State	Zip Code	
	County or City of Residence		Voter Identification #		
	Email Address		Daytime Phone #		
	<input type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.				
Campaign Depository					
Name of Primary Financial Institution <i>Wells Fargo</i>			Name of Other Financial Institution (if applicable) —		
City <i>Alexandria, VA</i>			City State		
State					
Committee Activity					
Dates of Activity	Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")				
	Date first contribution accepted:	<i>N/A</i>			
	Date first expenditure made:	<i>N/A</i>			
	Date campaign depository designated:	<i>6/19/12</i>			
	Date filing fee paid for party nomination:	<i>N/A</i>			
	Date Statement of Qualification filed:	<i>6/7/12</i>			
Date treasurer appointed:	<i>N/A</i>				

(continued on next page)



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Filing Method	
Filing Method	<p>Please indicate the method by which this committee will submit all required campaign finance reports:</p> <p><input checked="" type="checkbox"/> File electronically using SBE's Electronic Filing Application.</p> <p><input type="checkbox"/> File electronically using an SBE Approved Vendor (Please indicate Name of Vendor: _____)</p> <p><input type="checkbox"/> File paper reports.</p> <p>Signature <u>John J. Morris</u> Date <u>6/11/12</u></p>
Signatures	
Candidate's Signature	<p>I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the <i>Code of Virginia</i>. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <p>Candidate's Signature <u>John J. Morris</u> Date <u>6/14/12</u></p>
Treasurer's Signature	<p>I accept the appointment of Treasurer of this campaign committee. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I understand that I must truthfully report all monies and things of value which this campaign committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the <i>Code of Virginia</i> for late or non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <p>Treasurer's Signature _____ Date _____</p>